

Monroe County Library System
APPLICATION FOR NON-RESIDENT LIBRARY CARD

PLEASE PRINT

Cards issued to individuals only. Annual fee per card is \$25.

Name: _____

Did you pay for a library card last year? Yes ___ No ___

Check one: Child (Grade k-6) Young Adult (Grade 7-12) Adult

If current card-holder, please list bar code # from your library card _____

Address _____

City _____ State _____ County _____ Zip Code _____ - _____

Telephone Number () _____ Ext. _____

E-mail address _____ Date of Birth _____

Card may be used at any public library in Monroe County. Please indicate the library you will be using most often (**check only one** of the following):

___ RPL (Central & branches)	___ E. Rochester	___ Hamlin	___ Odgen	___ Riga
___ Brighton	___ Fairport	___ Henrietta	___ Parma	___ Rush
___ Brockport	___ Gates	___ Irondequoit	___ Penfield	___ Scottsville
___ Chili	___ Greece	___ Mendon	___ Pittsford	___ Webster

In signing this application, I assume responsibility for: All materials borrowed on the library card; Returning all materials on time; Paying fines on overdue materials; Reporting lost or stolen library card; Reporting change of address; Paying for lost or damaged materials; Following the policies and "rules of conduct" of the library.

Signature of cardholder _____ Date _____

Signature of parent or guardian (if applicant is under 18 years of age) _____

Payment options:

_____ Check or money order payable to "MCLS" enclosed (amount) _____

_____ Charge to Credit Card (Visa or Mastercard) (information below must be filled in)

Credit card number _____ Check if ___ Mastercard or ___ Visa

Name on card _____

Card expiration date _____

I hereby authorize the above charges against my account _____

Signature (required)

Mail completed form with check, money order or credit card payment to: **MCLS Finance Office, 115 South Avenue, Rochester, NY 14604.** Applications and payments may be accepted at the Central Library and selected public libraries in Monroe County. Please contact your library for more information.

For library use only: Amount paid _____ Library Name _____ Date _____